

Traumatic Amputation QUERI Workshop

Setting the Agenda for Evidence Based Best Practices and Quality Improvement Efforts

May 19-20, 2004

Wednesday, May 19th

- 7:00-8:00am Registration and Continental Breakfast
- 8:00-8:30 Film Showing: "Our Turn to Serve: Looking After Our Newest Veterans"
- 8:30-9:00 Welcoming Remarks
Mindy Aisen, MD, Deputy CRADO
Robert Ruff, MD, PhD, RR&D Acting Director
John Demakis, MD, HSR&D Director
- 9:00-9:30 Traumatic Amputation: War Theater to Medical Treatment Facility (MTF)
Paul Pasquina, MD,LTC, MC, Chief, Physical Medicine and Rehabilitation Service, Walter Reed Army Medical Center
- Overview talk re: evacuation, treatment stages, and secondary issues including co-morbidities, complications, psychological aspects, and other barriers to rehabilitation
- 9:30-9:40 Q&A discussion
- 9:40-10:10 Maintaining Continuum of Care: MTF to the VA
Frederick Downs, Chief Consultant Prosthetics, Department of Veterans Affairs
Joseph Czerniecki, MD, Associate Director, VA Center of Excellence for Limb Loss Prevention and Prosthetic Engineering
- Overview talk re: transitioning care from MTFs to VA, including access to care, follow-up, available resources, and room for improvement
- 10:10-10:20 Q&A discussion
- 10:20-10:40 BREAK (foyer)
- 10:40-11:10 Traumatic Amputation: Where Are We Going in Research?
Robert Gailey, PhD, PT, Miami VA Medical Center, University of Miami School of Medicine
- Overview of ongoing clinical, rehabilitation, and outcomes research
- 11:10-11:20 Q&A discussion

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11:20-11:50 Quality Enhancement Research Initiative (QUERI): Mission, Structure, and Activities

Brian Mittman, PhD, Interim QUERI Associate Director, HSR&D

11:50-12:10pm Q&A discussion

12:10-12:30 Systematic Reviews of Amputation Healthcare: Overview and Examples
Mark Helfand, MD, MS, MPH, Director, AHRQ's Oregon Health Sciences University Evidence-based Practice Center

12:30-1:00 Charge to Working Groups

- Review of process and logistics

1:00-2:00 LUNCH (on your own)

2:00-3:30 Amputation Clinical Working Groups

1. Access to Healthcare/Resources in VA
2. Prosthetic Prescriptions: who gets/needs which prosthesis?
3. Prosthetic Fitting: how do we ensure proper fitting and adjustments?
4. Amputee Rehabilitation: what steps are needed/must be taken to achieve maximum function?
5. Comorbidities, Complications, and Psychosocial Issues Associated with Traumatic Amputation

**Participants in each Clinical Group outline the necessary steps, activities, and resources that will comprise a complete QUERI portfolio in their clinical priority area. Individual Clinical Group members then join one of the four QUERI Methods Groups in order to become familiar with the QUERI six-step process. On Day Two, Clinical Groups will reconvene to refine their plans for a complete QUERI portfolio in their clinical area, representing a component of a single overall Traumatic Amputation QUERI Center.*

3:30-3:45 BREAK (foyer)

3:45-5:15 QUERI Methods Working Groups

- Steps 1/2: clinical priorities and best practice recommendations
- Step 3 (and M): current practices and quality gaps and their determinants; data/methods needs
- Step 4/5/6 (and M): improvement programs and evaluation; data/methods needs
- Step C: clinical research (evidence) needs

6:00 DINNER (local restaurant)

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Thursday, May 20th

- 7:00-8:00am Continental Breakfast
- 8:00-10:50 Clinical Working Groups reconvene
- 10:00 BREAK (in breakout rooms)
- 11:00-11:30 Clinical Working Group Report: Group 1, Access to Healthcare/Resources in VA (includes 20 minute presentation and 10 min Q&A)
- 11:30-12:00pm Clinical Working Group Report: Group 2, Prosthetic Prescriptions
- 12:00-12:30 Clinical Working Group Report: Group 3, Prosthetic Fitting and Adjustments
- 12:30-1:30 LUNCH (on your own)
- 1:30 Coffee and dessert served in the back of the plenary room
- 1:30-2:00 Clinical Working Group Report: Group 4, Amputee Rehabilitation
- 2:00-2:30 Clinical Working Group Report: Group 5, Comorbidities, Complications and Psychosocial Issues Associated with Traumatic Amputation
- 2:30-3:30 Summary, Conclusions, and Next Steps
- “Bird’s Eye” overview of possible Traumatic Amputation QUERI addressing the five clinical amputation issues
 - Facilitated large group discussion to address overlaps and identify any gaps remaining in Clinical Group plans
 - Plans for further development and coordination of activities
 - Announcement of Traumatic Amputation QUERI and other solicitations